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UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No. 1988480
	Inventor: Daniel A. Tepei, 3299 Woodtree Lane, Buford, Georgia 30519
	Title: DRYWALL CUTTING GUIDE

To: **Mail Stop Patent Application**
Commissioner for Patents
P. O. Box 1450
Alexandria, Virginia 22313-1450

APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS
[X] Fee Transmittal Form PTO/SB/17 (In duplicate)	[X] Information Disclosure Statement, including Form PTO-1449 and copies of
[X] Applicant claims small entity status.	__6__ references.
[X] Specification and 3 Claims (16 pp.)	[X] Check No. _1947_ in the amount of
[X] Drawings, showing Figs. 1 thru 3 (1 p.)	$ __385.00__ .
[X] Combined Declaration and Power of Attorney.	[ ] Nonpublication Request Form PTO/SB/35
	[X] Return Receipt Postcard.

Customer Number is: **022824**

Correspondence Address is:
Donald R. Schoonover
4211 Rolling Hills Drive
Nixa, Missouri 65714-8771
USA

Telephone: **(417)724-2188**
Facsimile: **(417)724-2469**
Email: **patentstms@aol.com**

Name: **Donald R. Schoonover**	Attorney Registration No. **34,924**
Signature: *Donald R. Schoonover*	Date: *February 10, 2004*

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

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_February 10_____, 2004.

Donald R. Schoonover
Donald R. Schoonover

UTILITY FILING FEE TRANSMITTAL	Attorney Docket No. 1988480
	Inventor: Daniel A. Tepei
[X] Applicant claims small entity status.	Title: DRYWALL CUTTING GUIDE
Total Amount of Payment: $___385.00___	

METHOD OF PAYMENT	FEE CALCULATION (continued)

METHOD OF PAYMENT

[X]   Check No. _1947_

The Commissioner is authorized to credit any overpayments or charge any additional fee(s) during the pendency of this application to Deposit Account No. **50-0961**

FEE CALCULATION

1. BASIC FILING FEE

Large Entity | Small Entity

Fee Code	Fee ($)	Fee Code	Fee ($)	Fee Description	Fee Paid
1001	740	2001	385	Utility Filing Fee	$ 385.00
				SUBTOTAL (1)	$ 385.00

2. EXTRA CLAIM FEES

Fee Paid

Total Claims   __3__ - 20 = __0__ X 9 = __0.00__

Independent Claims __3__ - 3 = __0__ X 43 = __0.00__

Large Entity | Small Entity

Fee Code	Fee ($)	Fee Code	Fee ($)	Fee Description
1201	84	2201	43	Independent claims in excess of 3
1202	18	2202	9	Claims in excess of 20
				SUBTOTAL (2) $ 0.00

3. ADDITIONAL FEES

Large Entity | Small Entity

Fee Code	Fee ($)	Fee Code	Fee ($)	Fee Description	Fee Paid
			None.		
				SUBTOTAL (3) $ 0.00

SUBMITTED BY:		
Name: **Donald R. Schoonover**	Reg. No. **34,924**	Telephone: (417)724-2188
Signature: _[signature]_	Date: _February 10, 2004_	

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February 10 , 2004.

[signature]

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